Fill in this information t	o identify your case:	
Debtor 1	Angela M. Fulton	
Debtor 2 (Spouse, if filing)	David H. Fulton	
United States Bankrup	tcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA	
	4-bk-03088	Check if this is:
(If known)		An amended filing
		A supplement showing post-petition chapter 13 income as of the following date:
Official Form	B 6I	MM / DD/ YYYY
<b>~</b>	., .	

## Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Describe Employment			
١.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Empleyment status	■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Clerk	Heavy Equipment Operator
	Include part-time, seasonal, or self-employed work.	Employer's name	Manpower	Coal Contractors, Inc.
	Occupation may include student or homemaker, if it applies.	Employer's address		100 Hazlebrook Rd. Hazleton, PA 18201
		How long employed t	here? 2 months	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

For Debtor 1

For Debtor 2 or non-filing spouse

2. \$ 3,995.57 \$ 2,735.00

+\$ 0.00

+\$ 0.00

Official Form B 6I Schedule I: Your Income page 1

Case number (if known)

5:14-bk-03088

				For	Debtor 1		ebtor 2 or	
	Copy	y line 4 here	4.	\$	3,995.57	\$	2,735.00	
5.	List	all payroll deductions:			<u> </u>		<u> </u>	
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,104.40	\$	684.04	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	330.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,434.40	\$	684.04	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,561.17	\$	2,050.96	
8.	List a 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	492.33	
	8e.	Social Security	8e.	\$—	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	 8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	492.33	
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	2	2,561.17 + \$_	2,54		5,104.46
	State Include other Do no Special	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not a cify:  the amount in the last column of line 10 to the amount in line 11. The resi	dependavailabl	e to p	ay expenses list	ed in <i>Sc</i>	chedule J. 11. +\$	0.00
		that amount on the Summary of Schedules and Statistical Summary of Certain					12. \$ <b>Combine</b>	5,104.46 ed
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?				monthly	income
		Yes. Explain:						

	in this infor	mation to identify yo	our case:							
Deb	tor 1	Angela M. Fu	ulton			Ch	eck i	f this is:		
							Ar	n amended filing		
Deb	tor 2	David H. Ful	ton						ving post-petition cha	apter
(Spc	ouse, if filing)						13	expenses as of t	the following date:	
Unite	ed States Ba	inkruptcy Court for the	: MIDDLE	DISTRICT OF PENNSYL	VANIA		MI	M / DD / YYYY		
Case	e number	5:14-bk-03088				П	Α	separate filing for	Debtor 2 because [	Debtor
(If kr	nown)					_		maintains a sepa		
Of	ficial F	Form B 6J								
		le J: Your	_ Expen	ises						12/13
				If two married people are	e filing together, both	are ed	uall	v responsible fo	r supplying correct	
info	rmation. If	f more space is ne	eded, atta	ch another sheet to this t						
nun	nber (if kno	own). Answer ever	ry questioi	n.						
Part	1: Des	scribe Your House	hold							
1.	Is this a j	oint case?								
	☐ No. Go	to line 2.								
	Yes. D	oes Debtor 2 live i	in a separa	ate household?						
		l <sub>No</sub>								
		l Yes. Debtor 2 mus	st file a sen	arate Schedule .I						
			·	arato corrodato c.						
2.	Do you h	ave dependents?	☐ No							
	Do not list Debtor 2.	t Debtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relations Debtor 1 or Debtor 2	ship to		Dependent's age	Does dependent live with you?	
	Do not sta	ate the							□ No	
		nts' names.			Son			21	Yes	
									☐ No	
					Son			29	Yes	
									☐ No	
									☐ Yes	
									□ No	
3.	Do your e	expenses include	_				_		☐ Yes	
0.		s of people other the	han	No						
	yourself	and your depende	nts? ⊔	Yes						
Part	t 2: Est	timate Your Ongoi	na Monthi	v Expenses						
Esti	imate your	expenses as of yo	our bankru	uptcy filing date unless y						
			oankruptc	y is filed. If this is a supp	lemental Schedule J,	check	the	box at the top of	f the form and fill in	the
app	licable dat	ie.								
				government assistance if						
	value of si icial Form		d have inc	luded it on Schedule I: Y	our income			Your expe	enses	
(0		···,								
4.				ses for your residence. In	nclude first mortgage	1	\$		664.99	
	payments	and any rent for the	e grouna o	r lot.		٦.	Ψ -			
	If not incl	luded in line 4:								
		al estate taxes				4a.	\$		42.00	
		perty, homeowner's				4b.	- 1		0.00	
		me maintenance, re meowner's associat	•			4c.	- : -		100.00	
5.				our residence, such as ho	me equity loans	4d. 5.	э \$		0.00	
٠.					squity isuns	٥.	Ψ_		0.00	

Official Form B 6J Schedule J: Your Expenses page 1

Debto Debto	3		Case num	ber (if known)	5:14-bk-03088
6. <b>L</b>	Jtilities:				
6	Sa. Electricity,	heat, natural gas	6a.	\$	328.19
6	6b. Water, sev	ver, garbage collection	6b.	\$	130.00
6	Sc. Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	265.00
6	d. Other. Spe	ecify:	6d.	\$	0.00
7. <b>F</b>	Food and house	ekeeping supplies	7.	\$	1,150.00
8. <b>C</b>	Childcare and c	hildren's education costs	8.	\$	0.00
9. <b>C</b>	Clothing, laund	ry, and dry cleaning	9.	\$	160.00
10. <b>F</b>	Personal care p	roducts and services	10.	\$	57.00
11. <b>N</b>	Medical and der	ntal expenses	11.	\$	140.00
		Include gas, maintenance, bus or train fare.	40	•	259.00
	Do not include ca		12.	\$	358.00
		clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
		ributions and religious donations	14.	\$	25.00
-	nsurance.	anner and directed from the control of the line of the control of			
	5a. Life insura	surance deducted from your pay or included in lines 4 or 20.	15a.	•	0.00
	5b. Health ins		15a. 15b.	· ·	0.00
	5c. Vehicle ins		15b.	\$	
			15d.	•	167.00
	5d. Other insu	· · · · <u></u>	150.	<b>»</b>	0.00
	Specify:	clude taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
	· · ·	ease payments:		·	<u> </u>
1	7a. Car payme	ents for Vehicle 1	17a.	\$	0.00
1	7b. Car payme	ents for Vehicle 2	17b.	\$	0.00
1	7c. Other. Spe	ecify:	17c.	\$	0.00
1	7d. Other. Spe	ecify:	17d.	\$	0.00
		of alimony, maintenance, and support that you did not report a	is 10	•	0.00
		your pay on line 5, Schedule I, Your Income (Official Form 6I).	18.	<b>ф</b>	
		s you make to support others who do not live with you.	40	<b>&gt;</b>	0.00
	Specify:	erty expenses not included in lines 4 or 5 of this form or on Sci	19.	ur Incomo	
		on other property	20a.		0.00
	20b. Real estat		20b.		0.00
		nomeowner's, or renter's insurance	20c.		0.00
		ce, repair, and upkeep expenses	20d.	·	0.00
		er's association or condominium dues	20d. 20e.	·	0.00
	Other: Specify:	Paper producs & cleaning supplies	21.	·	50.00
		<u> </u>		+\$	
_		ance and repair		+\$	200.00
	Pet food			+\$	30.00
_	Cigarettes				155.00
22. <b>Y</b>	our monthly e	xpenses. Add lines 4 through 21.	22.	\$	4,122.18
Т	The result is you	r monthly expenses.			
	•	monthly net income.			
2	23a. Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	5,104.46
2	23b. Copy your	monthly expenses from line 22 above.	23b.	-\$	4,122.18
_	00- 00-tr	for a second by the second sec			
2	23c. Subtract your monthly expenses from your monthly income.  The result is your <i>monthly net income</i> .		23c.	\$	982.28
	THE TESUIT	to your monthly not income.			
F	or example, do yo	an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect you terms of your mortgage?	you file this our mortgage	s form? payment to incre	ease or decrease because of a
	☐ Yes.				
Е	Explain:				

## **United States Bankruptcy Court** Middle District of Pennsylvania

In re	Angela M. Fulton David H. Fulton		Case No.	5:14-bk-03088	
		Debtor(s)	Chapter	13	

## DECLARATION CONCERNING DEBTOR'S SCHEDULES - AMENDED

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting

	ofsheets, and that they are true and correct to the best of my knowledge, information, and belief				
Date	May 23, 2017	Signature	/s/ Angela M. Fulton Angela M. Fulton Debtor		
Date	May 23, 2017	Signature	/s/ David H. Fulton David H. Fulton Loint Debtor		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.